## OFFICIAL FILE Consider to the complaint of the complaint

800 334-7661

For Commission Use Only: Case:

Illinois Commerce Commission 527 E. Capitol Avenue Springfield, Illinois 62701

Regarding a complaint by (Person making the complaint):	
Against (Utility name): Connouver A Edison	
As to (Reason for complaint) EXCUSSIVE RATE INCROASE	DUE
To Mercel READING PROSERUS, NO M	fil OR
STATEMENS SiNCE MAY 5, ZOUT, RETALI	HTIOU
DUE TO HANDICAD CONDIDON & M	150 icAL
REQUIREMENTS. IN BANKRUPTLY DUE	TO UTILITY.
in CHICLED Illinois. Dis PUTE BILLING	
TO THE H.LINGIS COMMERCE COMMISSION, SPRINGFIELD, H.LINDIS:	Chicago (1) of
My mailing address is 505 N, WKCSHORE +	医并1001000
The service address that I am complaining about is	F CLI
My home telephone is [312] 399-6986	ERK'S
Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at	RK'S OFFICE
My e-mail address is I will accept documents by electronic means (	e-man) 🗆 💝 🔲 No
(Full name of utility company) COMMOUNTH COLSON (responde to the provisions of the Illinois Public Utilities Act.	ent) is a public utility and is subject
In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved wit	h your complaint.
Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?	TYES No
Has your complaint filed with that office been closed?	Yes No

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.
extra sheet of paper if needed. See Front Portico OF Computation
Please clearly state what you want the Commission to do in this case: Lieu ATE Probusing
NOTICE: If personal information (such as a social security number or a bank account number) is contained in this complaint form or provided later in this proceeding, you should submit both a public copy and a confidential copy of the document. Any personal information contained in the public copy should be obscured or removed from the document prior to its submission to the Chief Clerk's office. Any personal information contained in the confidential copy should remain legible. If personal information is provided in your public copy, be advised that it will be available on the internet through the Commission's e-Docket website. The confidential copy of any filing you make, however, will only be available to Commission employees. If you file both a public and confidential version of a document, clearly mark them as such.
10 Live
Today's Date: 10-2-07 Lomptament's Signature: (Month, day, year)
If an attorney will represent you, please give the attorney's name, address, telephone number, and e-mail address.
When you finish filling out this complaint form, you need to file the original with the Commission's Chief Clerk. When filing the original complaint, be sure to include one copy of the original complaint for each utility company complained about (referred to as respondents).
VERIFICATION
A notary public must witness the completion of this part of the form.
I, Complainant, first being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge.
-t/h//
Complement's Signature  "OFFICIAL SEAL"  ANACELI SANCHEZ  NOTARY PUBLIC, STATE OF ILLINOIS
Subscribed and sworn/afffrmed to before me on (month, day, year) MY COMMISSION EXPIRES 3/6/2010
Signature, Notary Public, Illinois (NOTARY SEAL)
NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing.